



Delivering Excellence Every Day

Miami-Dade County Office of Emergency Management
9300 NW 41st Street
Miami, Florida 33178-2414
T 305 468-5400
www.miamidade.gov/fire/emergency-management.asp

Emergency Transportation Agreement

In the event of an emergency that requires the evacuation of «FACILITY NAME»,

I, _____, agree to provide transportation for the
(Owner of Vehicle)

residents of the above mention facility to the designated receiving facility and the transportation back
to the originating facility the vehicle stated below.

Vehicle:

Year _____
Make _____
Model _____
of Passengers _____

Facility:

Signature: _____
Print Name: _____
Date: _____
Name of Facility: _____
Address: _____
Telephone: _____

Owner of Vehicle:

Signature: _____
Print Name: _____
Date: _____
Vehicle Owner: _____
(Please print)
Address: _____
Telephone: _____